



PATHWAYS TO BETTER NUTRITION CASE STUDY

NEPAL

Strategic Background Report

August 2014

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About SPRING

The Strengthening Partnerships, Results, and Innovations in Nutrition Globally (SPRING) project is a five-year USAID-funded Cooperative Agreement to strengthen global and country efforts to scale up high-impact nutrition practices and policies and improve maternal and child nutrition outcomes. The project is managed by JSI Research & Training Institute, Inc., with partners Helen Keller International, The Manoff Group, Save the Children, and the International Food Policy Research Institute. SPRING provides state-of-the-art technical support and focuses on the prevention of stunting and maternal and child anemia in the first 1,000 days.

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ACRONYMS

ACF	Action Against Hunger (Action Contre la Faim)
AIN	Association of International NGOs
BMI	body mass index
CSO	civil society organization
FAO	Food and Agricultural Organization
GoN	Government of Nepal
IFPRI	International Food Policy Research Institute
JNSP	Joint Nutrition Support Program
M&E	Monitoring and Evaluation
MDGs	Millennium Development Goals
MoAD	Ministry of Agriculture Development
MoE	Ministry of Education
MoFALD	Ministry of Federal Affairs and Local Development
MoHP	Ministry of Health and Population
MoUD	Ministry of Urban Development
MSNP	Multisectoral Nutrition Plan
NAGA	Nutrition Assessment and Gap Analysis
NASDP	National Agriculture Sector Development Priority
NDHS	Nepal Demographic and Health Survey
NFSCC	Nutrition and Food Security Coordination Committee
NFSSC	Nutrition and Food Security Steering Committee
NHSP-IP	National Health Sector Program Implementation Plan
NLSS	Nepal Living Standards Survey
NNG	Nepal Nutrition Group
NPC	National Planning Commission
PBN	Pathways to Better Nutrition
REACH	Renewed Efforts Against Child Hunger and Undernutrition
SPRING	Strengthening Partnerships, Results, and Innovations in Nutrition Globally
SUN	Scaling Up Nutrition Movement
UNDP	United Nation Development Program

UNICEF	United Nations Children’s Fund
USAID	U.S. Agency for International Development
VDC	Village Development Committee
WASH	water, sanitation, and hygiene
WFP	World Food Programme
WHO	World Health Organization

ABSTRACT

Concrete evidence of how to effectively develop, implement, and adapt multisectoral nutrition strategies remains limited. SPRING intends to address this gap by conducting the Pathways to Better Nutrition (PBN) Case Study, a multi-year prospective effort that chronicles the implementation of Nepal's 2012 Multisectoral Nutrition Plan (MSNP).

Made in consultation with development partners, the MSNP is the result of a coordinated effort between five government sectors, and led by Nepal's National Planning Commission (NPC). The Prime Minister has endorsed the final document; it is now the country's main roadmap to reducing chronic malnutrition over the next 5-10 years.

The PBN study follows the implementation of the MSNP as *the* key policy for nutrition activities in Nepal, including a look at potential interactions with other single-sector policies. The study will generate periodic technical briefs for the Government of Nepal (GoN) and other stakeholders, focused especially on budgetary processes, multisector coordination, and the interaction between national-level policy and district-level context. These briefs will also be disseminated outside of Nepal as part of SPRING's effort to build evidence around scaling up multisectoral nutrition strategies.

This background paper outlines the scope of the PBN Case Study, provides the rationale for Nepal as a study subject, describes the policy and nutrition context of the country, and highlights key details around the MSNP itself. It is intended as a preamble to future technical briefs, and provides the reader with contextual information to better understand PBN findings.

Pathways to Better Nutrition Case Study Nepal

Strategic Background Report

August 2014

STUDY OBJECTIVES AND BACKGROUND

The U.S. Agency for International Development (USAID)-funded SPRING Project began implementation of the “Pathways to Better Nutrition” (PBN) case study in 2013. The objective of this mixed method, prospective study is to explore how the Government of Nepal (GoN) prioritizes nutrition interventions and supports the implementation of its national nutrition plan to reach its chosen goals of reducing undernutrition.

SPRING’s research focuses specifically on:

- a) Elucidating the relative emphasis given to the nutrition-related activities proposed in the national plan and how the prioritization evolves over time, and
- b) Determining how the prioritization of these activities (and modifications in any) affects the resources allocated for each activity over time.

The study is in the process of collecting qualitative and budget data over two years to help to answer these questions, and uses secondary survey data to help illuminate differences in the nutrition context across the country. The results will be presented in a series of technical briefs on key research findings, which will be disseminated not only in Nepal but globally as well, to facilitate learning about the case study countries’ experiences. This case study will not assess the impact of these prioritized activities on nutritional status, however, SPRING is aware of other studies that will explore this during the same time period.

Countries were selected for this study using the “most different” method based on demographic and nutritional indicators (Seawright and Gerring 2008). Nepal was selected as one of the first countries. For more details on SPRING’s case selection process and for other documents produced as part of the case study, please see the PBN page on SPRING’s website at <http://www.spring-nutrition.org/publications/series/pathways-better-nutrition-case-study-series>.

As a first step in the case study process, SPRING has developed this background summary report to orient the reader to the Nepali context and the activities that have occurred in nutrition prior to the start of the prospective study. This report will cover:

- 1. A brief summary of nutritional status in Nepal**
- 2. What is known about funding for nutrition in Nepal**
- 3. The policy environment that preceded the Multisectoral Nutrition Plan (MSNP)**
- 4. The MSNP: key points, actions, and timeline**
- 5. Notable actions that have occurred since the MSNP was enacted (2012-2013)**

NUTRITION STATUS AND TRENDS IN NEPAL

Nepal has shown remarkable progress in reducing mortality rates, and is on track to meet the Millennium Development Goals (MDGs) for both maternal and child mortality. These dramatic improvements are likely caused by overall changes in improved population health and nutrition, driven by changing demographics of increasing urbanization, increasing outmigration for work, and improving education (including women's education).

Nepal benefits from a wealth of data on nutrition that allow review of trends over time, including: Demographic and Health Surveys (NDHS, collected every five years since 1996), Nepal Living Standard Surveys (NLSS, collected in 1996, 2004, and 2011), and several other cross-sectional nutrition and food security surveys (see efforts by ACF, Concern Worldwide, and International Food Policy Research Institute (IFPRI) for other examples) (ICF International 2014; The World Bank 2012). There are also several reports that summarize nutrition status across the various socio-economic and geographic contexts of Nepal (Pahari 2012; National Planning Commission (NCP) and Central Bureau of Statistics 2013) Additional reports focusing on the agriculture sector, provide information on food security, and highlight potential risks to nutrition posed by limited food availability and accessibility (IFPRI 2010; IOD PARC and Rupantaran Nepal 2013; World Food Programme (WFP) 2014; Food and Agriculture Organization of the United Nations (FAO) 2010). These reports provide information on other sectors and their involvement with nutrition and nutrition determinants. The results of these reports will not be repeated here, but a brief recap of nutrition trends will be provided as a context for the development of the MSNP.

Figure 1, below, shows a strong improvement in underweight and stunting for children in Nepal, as measured by trends over time in NDHS data. Of the remaining nutrition target indicators named in the MSNP (low birth weight andwasting), and including anemia, the trend is unclear, with rates remaining relatively static over this time period. Figure 2 shows trends in selected nutritional indicators for women—there are few data points available for anemia, but low body mass index (BMI) appears to decrease between 2001 and 2011. Relating these improvements to specific sector interventions is more difficult, and it is likely that many factors have contributed to these changes. It is too early to say from these data whether Nepal is on track to meet the MSNP targets (see Table 1 in a later section for the all MSNP target indicators and values).

Figure 1. Selected nutritional outcome indicators for children.

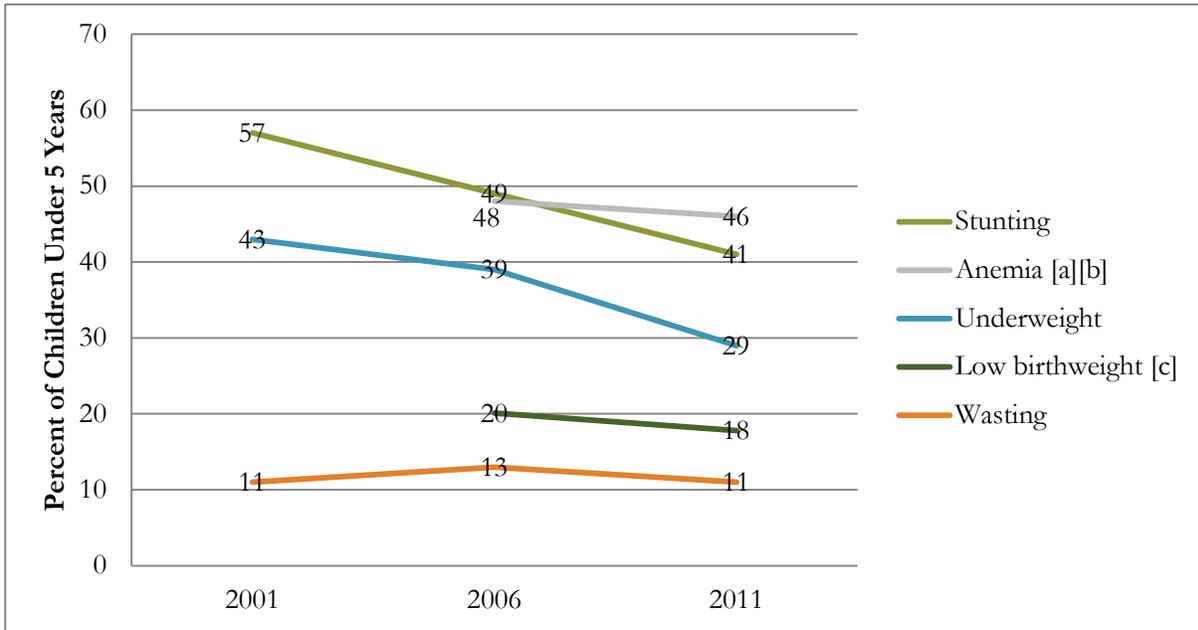
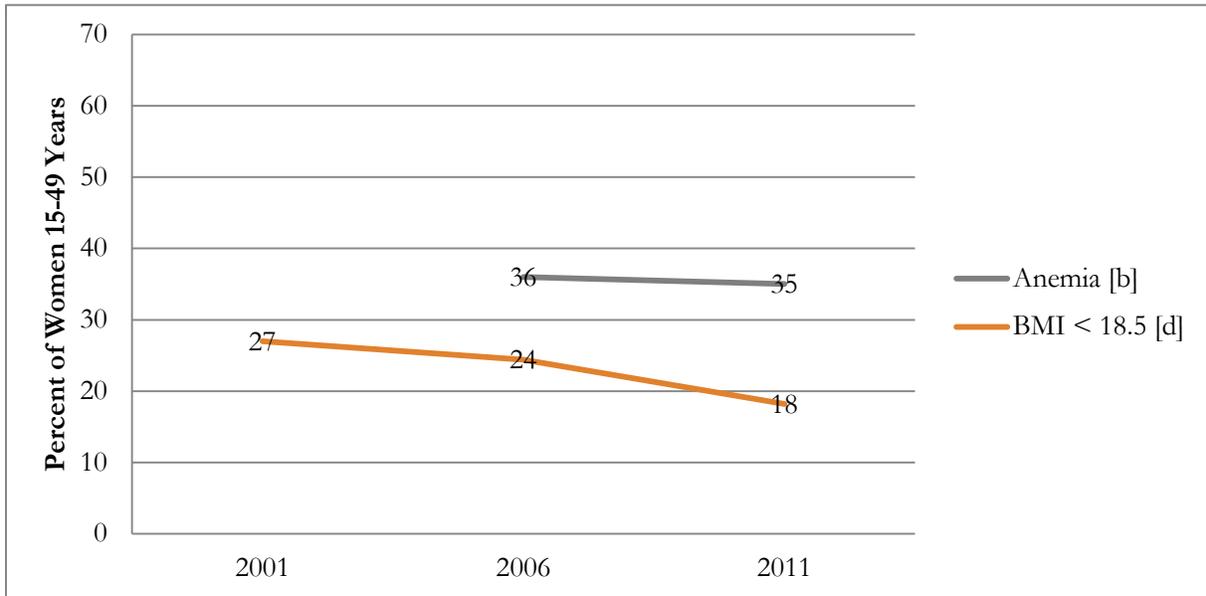


Figure 2. Selected nutritional outcome indicators for women.



Footnotes

[a] Anemia tests were not administered in 2001.

[b] Follows DHS calculations for children 6-59 months, and pregnant and non-pregnant women 15-49.

[c] Defined as weighing less than 2,500g if weighed at birth; or child was smaller than average if not weighed at birth. 2001 DHS survey did not ask for birth weight.

[d] Excludes pregnant women

Source: NDHS Final Report and Data, 2001, 2006, and 2011 with 2001 data corrected to WHO anthropometry standard (< 2 std dev)

Despite this progress, the current rates of undernutrition remain quite high. While there are some inconsistencies in the interpretation of the anthropometry results between surveys, both the recent NLSS and NDHS surveys show national stunting rates above 40 percent, wasting rates above 10 percent, and underweight for age is almost 30 percent. Furthermore, nutritional status remains strongly linked to poverty, with rates much higher in the lower wealth quintiles (Ministry of Health and Population (MoHP), New ERA, and ICF International, Inc. 2012). Income disparity is increasing in Nepal, further widening these gaps (United Nations Development Programme (UNDP) 2011). Although population growth has slowed, food production remains inadequate, and many feeding behaviors are proving difficult to change.

Nepal represents a country in transition—politically, economically and demographically. Many factors are changing rapidly that affect nutrition and the factors contributing to undernutrition. Literacy is improving rapidly, and gender equity in secondary education has improved significantly. Outmigration for labor is at its highest level, with over 50 percent of households reporting at least one person migrating away within the past 10 years, potentially contributing to more rapid than expected declines in fertility, and also increasing the amount of income received by households from remittances (MoHP, New ERA, and ICF International, Inc. 2012). The country is rapidly urbanizing, but the majority of the population continues as rural subsistence farm families, and agricultural production is still not adequate to meet national needs.

For more information on the status of nutritional drivers and barriers across Nepal's sub-regions, please refer to SPRING's PBN sub-regional snapshots, available at <http://www.spring-nutrition.org/publications/series/pathways-better-nutrition-case-study-series>.

FUNDING FOR NUTRITION – OVERVIEW AND CURRENT STATUS

While no country being tracked by SUN has yet to estimate the gap between costs and funding available for nutrition, Nepal is considered to be making good progress toward understanding their financing of nutrition and the needed resources to fully scale up (Scaling Up Nutrition (SUN) 2013a).

In terms of financial oversight of the MSNP, there is a financial management plan for flow and allocation of funds across sectors. The MSNP proposes that financial coordination be done through a ‘basket fund’ for the MSNP, established at the Office of the Financial Comptroller General. The MSNP makes the NPC responsible for aid coordination and details specific financial practices, including use of a basket fund and contributions by GoN and development partners at two separate points in the fiscal year.

Thus far, nutrition budgeting has been primarily limited to the nutrition section within the MoHP, although other sectors have appointed nutrition focal persons. In an analysis of health expenditure in 2006, nutrition was not specifically mentioned in the functional classification of public expenditure table (Nepal Health Economics Association 2009).

Within the budget of MoHP, Child Health Division, there is a specific nutrition line item which can be tracked. Between 2011/2012 and 2012/2013 it has more than doubled from US\$ 4.9 million to US\$ 11.7 million and is 90 percent secured. External assistance for nutrition has increased from US\$ 0.2 million to US\$ 5 million (SUN 2013b).

A Nutrition Assessment and Gap Analysis (NAGA) costing analysis estimated that the minimum expenditure needed for 2008 was approximately USD \$11 million, increasing to approximately USD \$19 million by 2010 (Pant 2009).¹ Donors have responded through support for many nutrition interventions implemented through the health sector (such as UNICEF support for breastfeeding) and through support for agricultural and sanitation efforts.

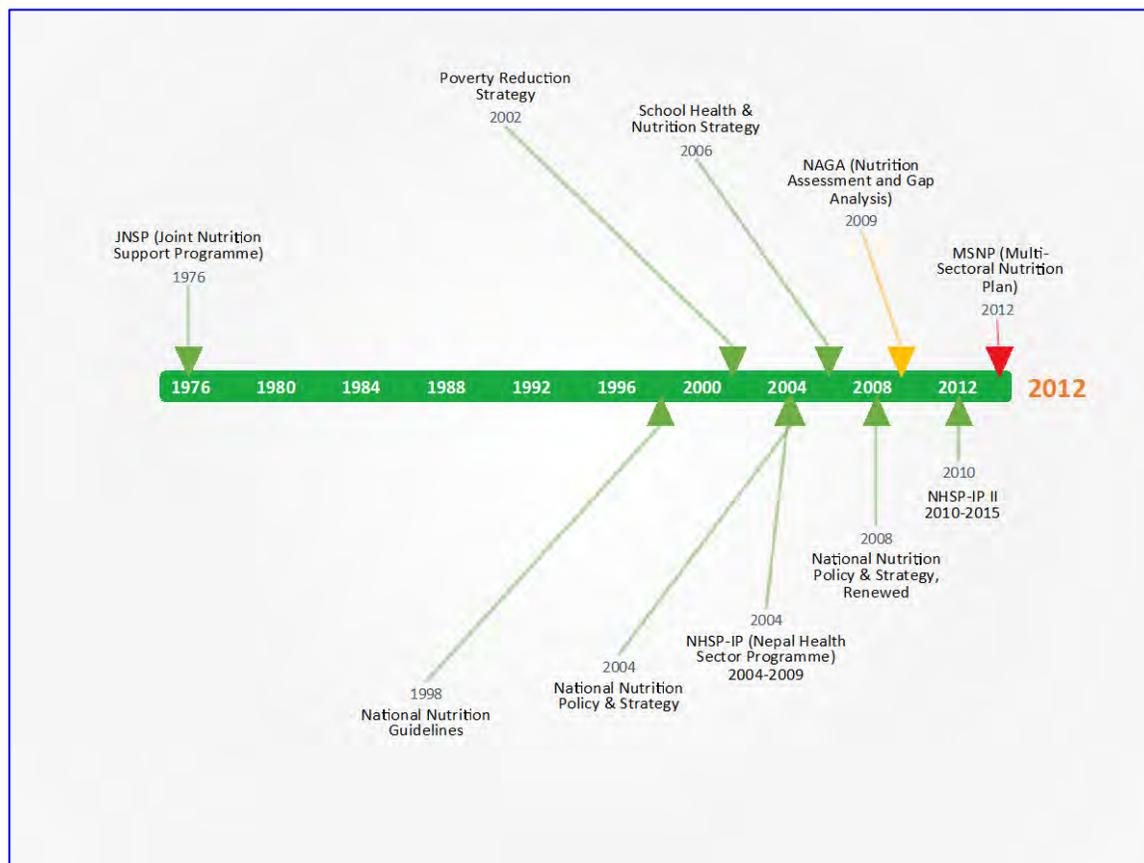
The PBN case study will be collecting budget data from all the named MSNP sector ministries and participating donors to help construct a picture of nutrition funding that can potentially be compared to the costing analyses to provide a picture of the funding gaps for nutrition in Nepal.

¹ USD values converted from rupees as reported by source, using the rupee value of 74.26 to USD \$1 on the date of the Report (10/17/2009). Conversion rate accessed from Nepal Rashtra Bank: <http://www.nrb.org.np/fxmexchangerate.php>.

THE POLICY ENVIRONMENT THAT PRECEDED CREATION OF MSNP

The GoN has been responsive to concerns about the nutritional status of women and children since surveys in the 1970's suggested high malnutrition rates, with over 48% of children under five years stunted (Pahari 2012). In 1976, the GoN initiated a nutrition specific policy that established a National Nutrition Policy Coordination Committee. This body evolved through the following decades, and eventually developed policy that included adaption to the Alma-Ata Declaration of 1978. Figure 3 shows the progression of policies. Most efforts to improve nutrition rested within the health sector, and although the agriculture sector focused on improving crop yields, this was not presented as a means to improve nutrition. These efforts resulted in improvement in overall child health, as demonstrated by the continual reduction in mortality, and in measures of program strength, however more specific nutrition programs did not maintain sustainable improvements in child nutrition indicators (MoHP, New ERA, and ICF International, Inc. 2012).

Figure 3: Nutrition Policy Evolution



In 2000, Nepal was a signatory to the MDGs that included reduction in poverty and hunger. These goals were included in the Government's long-term planning, reflected in their Poverty Reduction Strategy (2002) and in subsequent Three-Year Interim Plans. Refinement in approaches to reach the MDGs are reflected in the Government's Health Sector Program Implementation Plan (NHSP-IP) 2004-2009 which included a focus on health system strengthening and reaching more vulnerable populations. Toward the end of this planning cycle, there was renewed interest in nutrition among the global community. This was reflected in two key reports: the well-known 2008 Lancet series on nutrition (Lancet 2008) and a policy brief that helped to launch the SUN movement (www.scalingupnutrition.org, Nepal joined this movement in May 2011). This global interest was reflected in Nepal with a set of policy and strategy documents involving several sectors.

Within the health sector, the NHSP-IP II (2010-2015) included a new emphasis on nutrition related activities. The plan included percent of children underweight as a key indicator, and established goals for reducing this percentage from 39.7 percent to 29 percent by 2015. The plan went on to say *"Further reductions in under-five and infant mortality will be accomplished ... by implementing a more comprehensive nutrition programme—a major focus of NHSP-2."*²

Other sector plans also reflected this renewed interest in nutrition. In the agriculture sector, the Nepal Agriculture and Food Security Country Investment Plan (CIP) reflects a strong commitment to improving food security: *"The overall goal of the CIP is to reduce poverty and household food insecurity on a sustainable basis and to strengthen the national economy."*³ As with the health sector plan, there is strong emphasis on reaching vulnerable groups. However, the programs described in this plan focus primarily on agricultural production, with indicators based on production efficiency, with little further mention of nutrition, or inclusion of nutrition targets.

Although the education sector does not specifically focus on nutrition in school children in their School Sector Reform Plan (2009-2015), the Ministry of Education (MoE) does collaborate with the MoHP for the implementation of the GoN's National School Health and Nutrition Strategy (2006) (Baidya and Budhathoki 2010). Other sectors have also been engaged, including sectors involved with women's development, local development, and water, sanitation, and hygiene (WASH). These early linkages set the stage for the GoN to be ready for the renewed global interest in nutrition programming.

In 2010, in a collaborative effort between the GoN and a number of development partners, a NAGA was completed (GoN et al. 2009). This review involved a number of consultants supported by WHO, USAID, UNICEF, and the World Bank, and included a review of the agriculture situation with regard to nutrition, nutrition financing review, and health sector review. The summary document described the nutrition situation in terms of five 'determinants' which were critical factors affecting nutrition:

1. food availability
2. affordability
3. feeding behaviors
4. diet quality (including micronutrient content and dietary diversity)
5. infection

This was followed by sector reviews focusing on current programs, helping the GoN develop recommendations for strengthening nutrition through each sector activities. These analyses, along with the growing emphasis on nutrition in longer term planning documents, provided the background for the GoN to develop the multisectoral approach being implemented currently.

² Nepal Health Sector Programme Implementation Plan-2 (2010-2015). 2010.

³ Nepal Agriculture and Food Security Country Investment Plan. 2010.

THE MSNP

The GoN’s **Multisectoral Plan of Action for Nutrition** (2013-2017) (MSNP) was finalized in 2012. The plan was prepared by five government sectors⁴, led by the NPC, in collaboration with development partners, and endorsed by the Prime Minister. The plan was developed following a series of consultative meetings led by the NPC, and involved the National Nutrition and Food Security Steering Committee (NFSSC) and Coordination Committee (NFSCC) members, the key line ministries, sector reference and working groups, and representatives from various development partners including donors, academia, and civil society organizations (CSOs). The plan endorses the NAGA recommendations, and embraces a multisectoral approach while establishing the ‘architecture’ for this approach through the NPC.

The goal of the five-year MSNP is to improve maternal and child nutrition via a one-third reduction of maternal, infant, and child undernutrition (GoN and NPC 2012). The plan describes challenges and constraints as well as capacity gaps and includes both nutrition specific and nutrition sensitive interventions. Nutrition specific interventions will be mostly accomplished through the health sector, and can be scaled-up rapidly. Nutrition sensitive interventions are seen to be more difficult, and the plan notes that lack of nutrition capacity and prioritization in these sectors means that “Taking these different sector approaches to scale in a coordinated way will demand considerable energy and technical capacity at the local level.” (GoN and NPC 2012) The key target indicators for MSNP and related global initiatives are listed in Table 1 below, with the goals expected to be reached by 2017.

Table 1: Key MSNP Indicators

Nutritional Indicator Used to Define Progress by Key International Nutrition Movements ⁵	MSNP 2017 Targets (referencing 2006/2011 baseline)
Completion of Primary Education	Increased-no target
Low Birth Weight (<2500g)	Reduced-no target
Stunting (HAZ<-2SD)	Reduced to below 29%
Underweight (WAZ <-2SD) (Under 5)	Reduced to below 20%
Underweight Non-Pregnant Women 15–49: BMI less than 18.5kg/m ²	Reduced by 15%
Wasting (WHZ<-2SD) (Under 5)	Reduced to below 5%

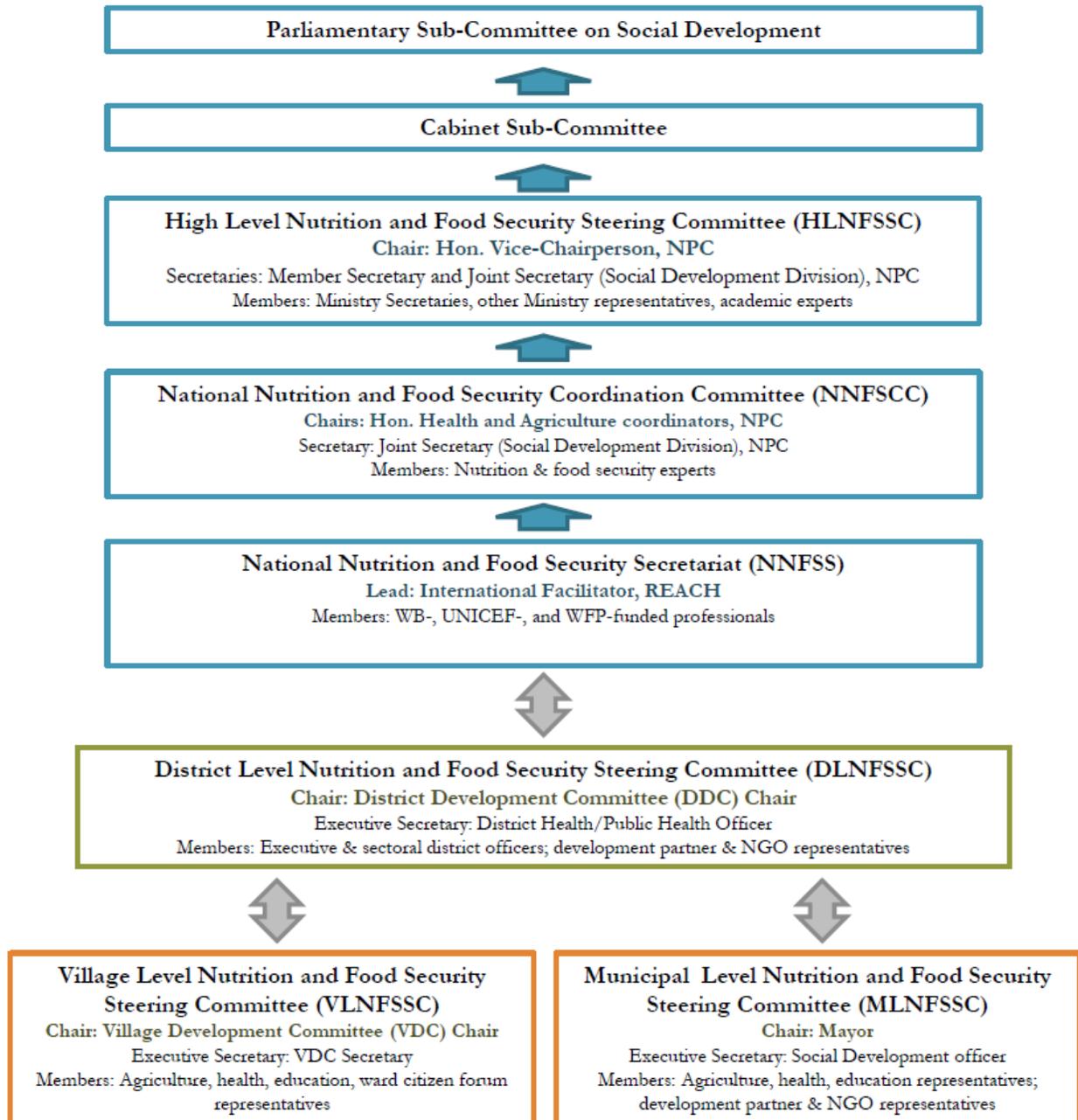
⁴ MoHP, MoAD, MoE, MoUD, and MoFALD

⁵ Key international nutrition movements include the MDGs, the WHO Comprehensive Implementation Plan on MIYCN, Zero Hunger Challenge, and USAID’s Global Health Initiative.

MSNP GOVERNING STRUCTURE

The MSNP describes a management structure, mediated through the NPC, at the national, sub-national and district level, thus providing a proposed ‘architecture’ for implementation and coordination. The committee structure is described in Figure 4 below.

Figure 4: MSNP Governance Structure

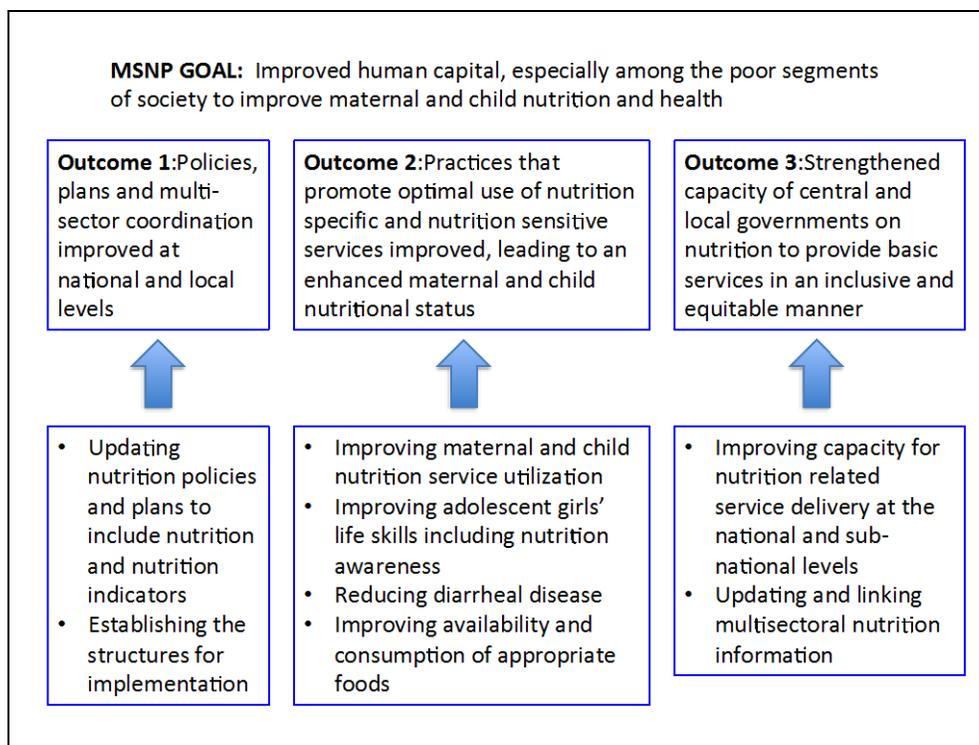


At each level of government, the nutrition and food security committee oversees implementation and assists with coordination across sectors. These committees include representation from each sector, among other groups, and have been designed to fit within the existing local structures. At the highest level, under direction from the National Development Council, the NPC is capable of sectoral coordination through the high level NFSSC. The NPC reports through a cabinet sub-committee to the Parliamentary Sub-committee on Social Development. The National Nutrition and Food Security Secretariat (NNFSS) provides a coordinating body for nongovernmental nutrition stakeholders, such as donors, CSOs, and nutrition and food security experts. This body is chaired by the REACH coordinator. The district and village development committee (VDC) levels also have NFSSCs. At the VDC level, the NFSSC is chaired by the VDC chair, with representation from education, health and agriculture, and the ward citizen forum, and VDC secretary as member secretary.

KEY ACTIONS AND TIMELINE FOR THE MSNP

The MSNP is designed to achieve three major outcomes (see Figure 5), and provides a detailed list of expected results and activities, along with short descriptions of the implementation plan (including roles and responsibilities).

Figure 5: MSNP Outline



A series of activities and sub-activities are laid out below the outcome level for each of the eight output areas. In this way, the plan includes the specific activities that each sector is expected to include in their sector planning to address undernutrition. The plan includes a logical framework and action plan for each of the key sectors, including health, education, WASH, agriculture, and local development sectors (See Annex 2 of the MSNP).

MONITORING THE MSNP

The NPC is tasked with developing the monitoring and evaluation (M&E) plan for the MSNP, noting a number of potential indicators for consideration, difficulty of monitoring across sectors, and the fact that existing sector information systems may be too complex to be helpful for monitoring progress with the MSNP. The MSNP provides a consolidated logical framework with a comprehensive listing of ‘indicators of work performance’ for each outcome. This is followed by a ‘Consolidated Cost Action Plan’ and timeline. In addition, there is a logical framework and action plan for each sector, again listing work performance indicators and anticipated resource requirements. The sources of information, definitions for selected indicators, and timing and mechanism for collection vary considerably across sectors, and coordinating this array of indicators is likely to be challenging.

POLICY IMPLEMENTATION REVIEW MECHANISMS

The MSNP calls for the National NFSSC to meet quarterly and to report biannually to a Cabinet sub-committee, which will bring recommendations to a Parliamentary sub-committee for policy guidance. A similar structure at the district level, guided by the NFSSC, provides a mechanism for district level implementation review.

MSNP TIMEFRAME

The MSNP describes the anticipated implementation timeline as *“an incremental one, with a gradually increasing rate of scaling up as experience and capacity is created in the districts...”* (GoN and NPC 2012). Based on 11 selection criteria, the MSNP identified six “prototype” districts for implementation in the first year. Within each prototype district, implementation would begin in two VDCs during the first six months, with scaling up within the district done by the end of the first year. Depending on the results for these prototype districts, the MSNP anticipated scaling up to additional districts, as shown in Table 2. In each district, priority VDCs would be selected—and the scaling-up would focus on these priority VDCs. Implementation will be incremental for districts as well as VDCs.

Table 2: MSNP Anticipated Scale-Up Plan

Year	# of districts added	Total by end of year	Comment
2013	6	6	2 VDCs in first 6 months, added all priority VDCs by end of year
2014	12	18	Incremental inclusion of priority VDCs—but implementation delayed
2015	16	34	~50% of VDCs
2016	15	49	~50% of VDCs
2017	26	75	Only priority VDCs

The MSNP also provides a timeframe for specific activities to be completed within the duration of the MSNP mandate (2013-2017). An estimated budget by year is provided. In addition, each of the sector plans includes a timeline (by year) for their activities and sub-activities.

Other partner nutrition efforts follow the budgetary timeframe for their institutions. UNICEF has ongoing nutrition activities as a continuation of support for earlier Government efforts, and USAID has a bilateral nutrition project (Suaahara) that preceded the finalization of the MSNP as well as KISAN, an integrated agriculture and nutrition program. While these contribute to the overall MSNP goals, they present challenges in coordination and evaluation.

STAKEHOLDERS

Aside from the NPC, the MSNP is carried out by five key Ministries: MoHP, Ministry of Agriculture Development (MoAD); MoE; Ministry of Urban Development (MoUD); Ministry of Federal Affairs and Local Development (MoFALD) along with key development partners. Other stakeholders include the Association of International NGOs (AIN), the Nepal Nutrition Group (NNG), and Food Security Working Group. The implementation stakeholders are primarily the local sector staff at the district level. The plan will require donor support, and both the process of development and the anticipated implementation include broad representation from international and national partners.

The high level NFSSC has representatives from the key ministries, while the National NFSCC and NFSS also have representation by the key government, donor, and CSO stakeholders. Nutrition focal points have also been designated in the key ministries-MoHP, MoE, MoAD, MoFALD, MoUD and MWCSW.

By engaging the critical sectors in the development of the MSNP, the elements within the plan are linked to sector plans. However, each sector had, at the time of the evolution of the MSNP, their own sector policy documents and strategies, with different timelines for revision of these documents. Thus one task for the MSNP is to ensure that over time, each sector strategy embraces the concepts and activities within the MSNP within existing and new policy and strategy documents. For example, the National Agriculture Sector Development Priority for the Medium-Term (NASDP 2010/11–2014/15) may need to be revised to ensure the final elements of the MSNP for the agriculture sector is covered adequately. Similarly, the information systems for each sector are different, and as noted in the MSNP, developing an integrated monitoring system from these disparate information systems will be challenging.

BARRIERS TO EFFECTIVE IMPLEMENTATION AT THE NATIONAL AND SUB-NATIONAL LEVELS

Establishing a truly multisectoral program, particularly for a complex issue like nutrition, is difficult at best. In Nepal, there is historical precedent of difficulty with the JNSP. The MSNP acknowledges this in a list of risks and assumptions that focuses on barriers to intra-government collaboration, including competing priorities and resource availability and allocation. The high level NFSSC includes sector representation at the Secretary level. While this provides high level representation of the sector, most Secretaries have limited background in nutrition and other more pressing sector responsibilities making it difficult to prioritize MSNP activities for their sector. Sector nutrition capacity at all levels is limited, and needs to be strengthened (UNICEF and World Bank 2013, Unpublished UNICEF report).

In addition, the variety of funding mechanisms and timelines between donors and the governments complicate the ability of the government to implement a unified nutrition policy. The MSNP calls for implementation decentralized to the district level and below, but the decentralization process is just beginning in Nepal. It will be difficult for districts to implement the MSNP without support from the

central level, since districts do not yet have full autonomy over budget flow, program prioritization, sector coordination, or capacity building and training.

Nepal's political instability resulted in more frequent than usual staff changes for key posts within each sector. At the same time, the political fluctuation at the district level has affected the ability of district staff to capitalize on the trend toward decentralization, including work planning and budget management. Like many other national policies, implementation of the MSNP has faced challenges in development of a timely M&E system.

NOTABLE ACTIONS SINCE THE MSNP

The MSNP was released at a time of political transition: in May 2012, Nepal's Constituent Assembly was dissolved, and an agreement among major political parties to hold elections for a new assembly and executive leadership was not reached until March 2013 (United Nations Nepal Information Platform 2014a). This political stalemate resulted in budget extension deferral (United Nations Nepal Information Platform 2014b), and decreased levels of aid disbursement and overall capacity for national budget management (Humagain 2013).

The high level NFSSC has met since then, but as a result of political changes has seen higher than expected turnover in the personnel assigned. As of May 2014, there is a new vice chair has been nominated by the GoN. Prior to this nomination the coordination committee continued to meet to keep the MSNP process moving, focusing on issues of government/partner coordination.

The GoN has been successful with advocacy and communication efforts, branding the effort around the 'first 1000 days' and getting support from the captain of the Nepal cricket team as a champion for nutrition. Donors and partners such as UNICEF, DFID, FAO, NNG, and AIN (among others) have engaged with this advocacy process. In addition, the Multisector Advocacy and Communication Strategy has been drafted and the Master Plan for capacity development for nutrition and food security is being drafted.

There have been a number of policy developments across several MSNP-aligned sectors. In 2013, Kantipur reported that the Agriculture Development Strategy (ADS) is being developed (with support from the Asian Development Bank) as a new blueprint on agricultural development. The ADS has planned for 10-year spending of Rs 250 billion, and is expected to supersede the current plan by 2015 (Prasain 2013). The ADS vision statement includes food and nutrition security as a key element, and the plan sets specific goals for reduction of stunting, food insecurity, and grain sufficiency that go beyond the targets set by the MSNP (ADB 2012). Within the MoHP, Swasthya Khabar Patrika reported in April 2014 that they have developed a draft health policy, the second of two, that reinforces a multisectoral approach to addressing undernutrition ("Draft of New Health Policy Prepared" 2014). Also, the MoFALD released their "Environmentally Friendly Local Governance Framework", which has added key M&E indicators relating to WASH priorities and food security. Finally, the NPC recently released their approach paper to thirteenth plan (FY 2013/13-2015/16), which highlights food security and nutrition across the agricultural, health, social security and protection, and child and adolescent services (NPC 2013)

In addition to MoAD, budget allocations for relevant sectors have increased since the release of the MSNP. In the 2013-2014 national budget, the government increased its allocations for the social sector, including the education and health sectors, by around 40 percent (Ghimire and Gautam 2013). However, actual public spending for these sectors lagged behind budgeted amounts, reflecting not only the political transition but also structural issues in the budget process and capacity to utilize aid (Humagain 2013).

At the local level, the NPC and concerned ministries initiated the MSNP roll out plan in six "prototype" districts (Achham, Kapilvastu, Nawalparasi, Parsa, Bajura, and Jumla). The NPC announced that the MSNP would be rolled out to twelve more districts in the 2013-2014 fiscal year (The Himalayan Times 2013; The Kathmandu Post 2013) Moreover, a Regional NFSSC in Far-Western region and district-level NFSSCs in MSNP districts have been formed to run the plan rollout. The Kathmandu Post reported that an estimated budget allocation of Rs 150 million has been made for program implementation in the six districts (The Kathmandu Post, 2013). However, district plans required more resources than the

government had anticipated, which resulted in the NPC convening a partner coordination meeting to discuss meeting funding gaps.⁶ Aligning various partner programs with the MSNP continues to be challenging, but the current NPC staff appear committed to holding regular coordination meetings.

⁶ Personal communication, UN stakeholder

CONCLUSIONS AND NEXT STEPS

Developing and implementing a multisectoral nutrition strategy is challenging, and successful models are limited. Nepal has undertaken this effort with the development of a clear and comprehensive Multisectoral Nutrition Plan and has already established an ‘architecture’ for its implementation, and has started implementing in several districts. The complexity of this effort has resulted in understandable delays, but with the establishment of functioning committees and solid government and donor support, the effort is moving ahead.

The SPRING PBN Case Study hopes to support this effort by providing meaningful, timely feedback of the qualitative and budget information and recommendations will be provided on the process of implementation, giving stakeholders periodic briefs on successes and areas for improvement. Some examples of the type of work SPRING is developing, around the some key domains of inquiry:

- **Scaling Up Nutrition:** to achieve “Scaled Up Nutrition”, it is critical to know not just what interventions work, but how countries internalize the process of scale up, and how to measure and succeed at that goal. A *Technical Brief on the Process of Scaling Nutrition* will be released for Nepal to report specific examples of how Nepal’s multisectoral scale up efforts have overcome challenges cited in the baseline.
- **Nutrition Financing:** SPRING is working with government and donor budgets and work plans to develop estimates of allocations and expenditures for the MSNP nutrition activities, to be outlined in the *2013/2014 National Level Budget Report* and for two to three districts in a *2013/2014 District level Budget Report*. Beyond providing figures, SPRING will use qualitative results to explain how these amounts were allocated and the negotiation process that occurred. This data can help explain shortfalls in funding and next steps for Nepal to improve the sustainability of this system.
- **Multisectoral Coordination:** SPRING’s PBN work strengthens and expands learning associated with multisectoral activities. SPRING will release *Nepal’s Technical Brief on Central –District Coordination* in the coming year. SPRING is planning several rounds of dissemination in partnership with the central nutrition coordinating bodies in each country to spur process improvements in the national plan rollout.
- **Adaptation of Plans to Context:** SPRING has produced *Sub-Regional Snapshots* for Nepal to provide key information on contextual needs to those rolling out the national nutrition package of interventions. *District Qualitative Reports* will be released in 2015 that explore district nutrition needs, perceptions of the adaptability of the MSNP, and district’s ability to convey these needs and nutrition priorities to central-level government and donors.

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